

Entry Blank—Please Type or Print

☒ Ms./Artist

☐ Mr./Artist

LESLEY

HALL

(last name last)

Permanent

Address

839 CARLTON DR. CAMPBELL

Street

City

44405

Daytime Tel.

(216) 755-9388

Zip

area

(412) 381-0455

Temporary or

Studio Address

Same as above

Street

City

Daytime Tel. ()

Zip

area

If you do not presently live in one of the counties of the Western Reserve, in which county were you born? _____

Collaborator (if any) _____

If May Show entries are not accepted or are not sold:

☒ Artist will pick up at Museum.

☐ Museum should dispose of.

☐ Museum should ship to artist at artist's expense:

Street

City

State

Zip

Special Instructions

Entry Blank must be completed in full and signed; forms received unsigned will not be accepted.

When necessary, include instructions or a drawing for assembling and displaying an object.

Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until August 6, 1989.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein.

Signature

Lesley Hall

I have received the unsold/unaccepted object(s) in good condition.

Signature

[Signature]

Entry Blanks

A

☒ Paintings
☐ Sculpture

☐ Graphics
☐ Crafts

☐ Photography
(specify category)

Materials used (media):

MIXED MEDIA ON WOOD

Title

"STRAPPED IN THE SKY"

Price or NFS

\$500

Insurance Value
if NFS Only

Size

30" x 36" x 1"
height x width x depth

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in
Edition

Price of Print
Unframed

Price of
Frame Only

ACCEPTED	DO NOT WRITE IN THIS SECTION (1)-28 5 43a pt	ACCEPTED
X		X
NOT ACCEPTED		NOT ACCEPTED

B

☐ Paintings
☐ Sculpture

☐ Graphics
☐ Crafts

☐ Photography
(specify category)

Materials used (media):

Title

Price or NFS

Insurance Value
if NFS Only

Size

height x width x depth

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in
Edition

Price of Print
Unframed

Price of
Frame Only

ACCEPTED	DO NOT WRITE IN THIS SECTION	ACCEPTED	REC'D
NOT ACCEPTED		NOT ACCEPTED	DATE

Detach entire portion along dotted line and submit with slides, but retain tags

1989 MAY SHOW

The Cleveland Museum of Art
Cleveland, Ohio 44106



Ms. LESLEY HALL
Name

839 CARLTON DR.
Address

CAMPBELL, OHIO 44405
City & State Zip

HAL 39 08091021 05/09/89
NOTIFY SENDER OF NEW ADDRESS
HALL, LESLEY
133 W SYCAMORE #4
PITTSBURGH PA 15211

Notification #1

Do Not
Detach

A

☒ Paintings

☐ Sculpture

☐ Graphics

☐ Crafts

☐ Photography

Title

"STRAPPED IN THE SKY"

ACCEPTED

NOT ACCEPTED

Do Not Detach

B

☐ Paintings

☐ Sculpture

☐ Graphics

☐ Crafts

☐ Photography

Title

ACCEPTED

NOT ACCEPTED

IMPORTANT - DELIVERY DATES

SAT. MAY 20

(TUES.-FRI.) MAY 22 - 25

To

Ann

Date

Time

WHILE YOU WERE OUT

Mr.

Leslie Hall

of

Phone

☐

TELEPHONED

☐

PLEASE CALL

☐

CALLED TO SEE YOU

☐

WILL CALL AGAIN

☐

WANTS TO SEE YOU

☐

RUSH

Message

Gene Canton will

pick up her piece on Monday.

Operator